



## OFFICE OF THE CITY CLERK

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[www.romenewyork.com](http://www.romenewyork.com)

### ALARM PERMIT APPLICATION

**PLEASE PRINT OR TYPE.** Answer all questions completely.

If a question is not pertinent, write N/A in the accompanying space. Do not leave any question unanswered. Incomplete or unanswered questions shall result in a denial of the application.

**Please include photocopy of driver's license**

This application for an Alarm user permit is made pursuant to the provisions of the Rome Code of Ordinances, Chapter 22, Emergency Services. <http://www.romenewyork.com/>

Date: \_\_\_\_\_, 20\_\_\_\_

#### **APPLICANT INFORMATION**

Name of Applicant: \_\_\_\_\_

Are You the Property Owner? Yes \_\_\_\_\_ No \_\_\_\_\_

IF NO – Has the property owner been notified of the alarm system? Yes \_\_\_\_\_ No \_\_\_\_\_

#### **RESIDENTIAL INFORMATION (Property where alarm system is installed)**

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

#### **Or if Applicable**

#### **BUSINESS/ORGANIZATION INFORMATION**

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Manager: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY OWNER:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

**SYSTEM INSTALLED BY:**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

NY State License Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**SECURITY SYSTEM**

Is there a security system? \_\_\_\_\_

Local alarm or monitored? \_\_\_\_\_

If monitored phone number of monitoring company: \_\_\_\_\_

**FIRE ALARM**

Is there a fire alarm system? \_\_\_\_\_

Local alarm or monitored? \_\_\_\_\_

Phone number of monitoring company: \_\_\_\_\_

Knox Box on site?      Yes \_\_\_\_\_      No \_\_\_\_\_

\* Please note that if you have a fire alarm system, the City of Rome Fire Department has a Knox Entry System. If you would like the fire department to have a key to your building, contact the Fire Department @ 339-7784 for further information. \*

**HAZARDOUS MATERIAL INFORMATION**

- |   |         |        |
|---|---------|--------|
| 1. Are hazardous materials stored or maintained at this location? | YES ( ) | NO ( ) |
| 2. Are material safety data sheets (MSDS) on file?                | YES ( ) | NO ( ) |
| 3. If Yes, Where?   |         |        |

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## **Key Holder**

Being a key holder for a person that has an alarmed building is a responsibility that should not be taken lightly. There have been some instances where responding key holders have needlessly created potentially dangerous situations. The following is a list of instructions (do's and don'ts) for key holders responding to alarms.

**Don't** rush to get there – **do** arrive safely.

**Don't** park in the driveway – **do** park on the street in front of the next-door neighbor's house.

**Do** call 9-1-1 and tell the dispatcher that you have arrived and wait for further instructions.

**Don't** enter the residence until asked to do so by the police.

**Don't** assume that it is just a routine false alarm. Trained police officers treat it, as a real threat so should you.

**Do** follow the officers' directions – for your safety, the responding officer's safety, and for the safety of anyone else involved.

**Do** remain in your car until the building has been cleared by the responding officers and determined safe to enter.

**Don't** assume that the responding officers know you and your personal relationship with the building's owner.

Following these simple instructions can help prevent a potentially dangerous situation from needlessly becoming even more dangerous.

**Please be sure to choose your key holders carefully. Be sure that you are confident that they can abide by and carry out the above listed guidelines.**

Key Holder: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Key Holder: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant**

Sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
**Notary Public or Commissioner of Deeds**

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**Police and Fire Department Use Only**

**Approved Rome Police Department**

\_\_\_\_\_  
Name Title Date

**Approved Rome Fire Department**

\_\_\_\_\_  
Name Title Date

**Application Fee & Licensing Information**

I hereby fix the license fee for the above license at the sum of twenty-five dollars (\$25.00) for registration of alarm system.

Date Fee Paid: \_\_\_\_\_

Fee Exempt: \_\_\_\_\_

Date License Issued: \_\_\_\_\_

License Number: \_\_\_\_\_

\_\_\_\_\_  
City Clerk Signature

\_\_\_\_\_  
Date

(Revised 9-3-15)